	Combined Declaration Fo	or Patent.	Application a	and ]	Power of Attorney			ATTOR 822849	NEY DO	CKET		
	As below named inventor, I hereby declare that:											
	My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below)											
	of the subject matter which is claime					•	·					
	TEMPLATE FOR AN	IMAGE (	CAPTURE	DEV	/ICE							
	The specification of which (check on	aly one item be	·low):									
ļ	is attached hereto.											
	was filed as United States A	• •	erial No. on and									
-	was filed as PCT internation	nal application	n Number on an	nd was	amended under PCT A	rticle 19 on	(if appli	icable).				
	I hereby state that I have reviewed an	nd understand	the contents of the	above	-identified specification, in	cluding the	claims, a	s amended b	y any an	endment		
	referred to above.  I acknowledge the duty to disclose to	o the U.S. Pate	ent & Trademark (	Office	all information known to r	ne to be mat	erial to p	patentability	as define	d in Title		
	37, Code of Federal Regulations, §1 I hereby claim foreign priority benefit		35 United States	Code.	8119 of any foreign applic	ation(s) for 1	natent or	inventor's c	ertificate	or of any		
	PCT international application(s) desi	ignating at leas	st one country other	er than	the United States of Amer	rica listed be	low and	have also id	entified b	elow any		
	foreign applications(s) for patent or									e United		
	States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:  PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:											
	COUNTRY (if PCT, Indicate PCT)	A.F	PLICATION NUMBER		DATE OF FILING (day month year)		ı	PRIORITY CLAIMED U	NDER 35 USC §	119		
	(47-07)1120000-7-07							YES		NO		
4								YES		NO		
								YES		NO		
	I hereby claim the benefit under Title 35, United States Code, 119 §(e) of any United States provisional application(s) listed below:											
	PRIOR PROVISIONAL APPLICA	TION(S) AN	D ANY PRIORIT	Y CL	AIMS UNDER 35 U.S.C.	§119 (e):						
	PROVISIONAL APPLICA	ATION NUMBER		+		FILING D	ATE					
		-		-								
	I hereby claim the benefit under Title the United States of America that is/	e 35, United S are listed belo	tates Code, §120 o w and, insofar as tl	f any p he sub	orior United States applicat ject matter of each of the c	ion(s) or PC' laims of this	Tinterna applica	itional applic tion is not di	ation(s) o sclosed in	lesignating 1 that/thos		
	prior applications(s) in the manner p Office all information known to me	provided by th	e first paragraph o	of Title	35, §112, I acknowledge	the duty to	lisclose	to the U.S. I	atent &	Trademark		
	between the filing date of the prior a							, g1.50, WIII	11 00000111			
•	PRIOR US APPLICATIONS OR 35USC§120:	PCT INTERN	ONS DESIGNATING TH	E U.S FOR	RBENE	FIT UNDER	!					
	U.S. APPLICATIONS						STATUS (Check one)					
	U.S. APPLICATION NUMBER	U S FILING DATE			PATENTE	ĒD	PENDING	ABAI	NDONED			
	PCT APPLICATIONS DESIGNATING THE U S											
	PCT APPLICATION NO	PCT FILI	NG DATE		U S SERIAL NUMBERS ASSIGNED (If any)							
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	nbined Dec	ATTORNEY DOCKET 82284SLP					
ag thi	ont(c) ac	sociated with Eastman Kod	ed inventor, I hereby appoint lak Company Customer Notes in the Patent and Tradem	0. 01333 to prosecute			
Send Correspondence to:  Patent Legal Staff  Eastman Kodak Company  Direct Telephone Ca (name and telephone number)  Sugar I. Parties							
		343 State Str		Susan L. Parulski (716) 477-4027 FAX: (716) 477-4646			
2	FULL NAME OF INVENTOR	FAMILY NAME Stephany	FIRST GIVEN NAME Thomas	SECOND GIVEN NAME M.			
0	RESIDENCE & CITIZENSHIP	Churchville	STATE OR FOREIGN COUNTRY New York 14428 USA	COUNTRY OF CITIZENSHIP USA STATE & ZIP CODE (COUNTRY)			
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2	ADDRESS FULL NAME OF	Eastman Kodak Company  FAMILY NAME	343 State Street, Rochester  FIRST GIVEN NAME  Donald	SECOND GIVEN NAME E.			
0	RESIDENCE & CITIZENSHIP	Olson CITY Rochester	STATE OR FOREIGN COUNTRY New York 14625	COUNTRY OF CITIZENSHIP USA			
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2	FULL NAME OF INVENTOR RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP			
0 5	CITIZENSHIP BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)  SECOND GIVEN NAME			
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME  STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP			
0 6	RESIDENCE & CITIZENSHIP BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)			
I I	nereby declare ne; and furthe aprisonment,	that there statements were made with	the knowledge that willful false statement	s made on information and belief are believed to s and the like so made are punishable by fine Il false statements may jeopardize the validity of			
	SNATURE OF 11		ature of inventor 202	SIGNATURE OF INVENTOR 203			
D	ATE 44 ~	5-200i	4-09-01	DATE 100 4-9-01			

Thomas m. stury and Days

DATE

4-5-2001

SIGNATURE OF INVENTOR 204

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